

Senate Amendment 3271

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1 1 Amend House File 811 as amended, passed, and
1 2 reprinted by the House, as follows:
1 3 #1. Page 16, line 29, by striking the figure
1 4 <5,266,946> and inserting the following: <5,496,946>.
1 5 #2. Page 18, by inserting after line 4 the
1 6 following:
1 7 <5A. It is the intent of the general assembly that
1 8 the department of human services review the
1 9 feasibility of expanding categorical food assistance
1 10 program eligibility in Iowa to at least 160 percent of
1 11 the applicable federal poverty level and simplifying
1 12 administrative requirements by eliminating current
1 13 asset tests for food assistance program eligibility.
1 14 The department shall estimate the potential economic
1 15 benefits and fiscal impact of making these changes on
1 16 individual Iowa families and the state. The
1 17 department shall report on or before December 15,
1 18 2009, concerning the review, providing findings and
1 19 recommendations, to the persons designated by this
1 20 division of this Act for submission of reports.>
1 21 #3. Page 18, line 17, by striking the figure
1 22 <34,342,700> and inserting the following:
1 23 <34,592,700>.
1 24 #4. Page 18, line 20, by striking the figure
1 25 <2,268,271> and inserting the following: <2,518,271>.
1 26 #5. Page 21, line 24, by striking the figure
1 27 <678,038,847> and inserting the following:
1 28 <677,613,847>.
1 29 #6. Page 29, line 29, by striking the figure
1 30 <37,799,472> and inserting the following:
1 31 <37,974,472>.
1 32 #7. Page 31, line 20, by striking the figure
1 33 <175,000> and inserting the following: <350,000>.
1 34 #8. Page 32, by striking lines 1 through 8.
1 35 #9. Page 33, line 30, by striking the figure
1 36 <34,280,400> and inserting the following:
1 37 <34,200,400>.
1 38 #10. Page 39, by striking lines 14 through 22.
1 39 #11. Page 39, by inserting before line 23 the
1 40 following:
1 41 <____. Of the funds appropriated in this section,
1 42 \$80,000 shall be transferred to the appropriation made
1 43 in this division of this Act for the family support
1 44 subsidy program to supplement that appropriation.>
1 45 #12. Page 40, by striking lines 13 through 21.
1 46 #13. Page 41, by inserting after line 20 the
1 47 following:
1 48 <3. If at any time during the fiscal year, the
1 49 amount of funding available for the family support
1 50 subsidy program is reduced from the amount initially
2 1 used to establish the figure for the number of family
2 2 members for whom a subsidy is to be provided at any
2 3 one time during the fiscal year, notwithstanding
2 4 section 225C.38, subsection 2, the department shall
2 5 revise the figure as necessary to conform to the
2 6 amount of funding available.>
2 7 #14. By striking page 42, line 34, through page
2 8 43, line 9.
2 9 #15. Page 44, by striking lines 21 through 27.
2 10 #16. Page 46, lines 33 and 34, by striking the
2 11 words <approved county management plan> and inserting
2 12 the following: <county management plan approved by
2 13 the board of supervisors>.
2 14 #17. Page 61, by striking lines 21 through 30.
2 15 #18. Page 61, by inserting before line 31 the
2 16 following:
2 17 <Sec. ____ PHARMACY=RELATED ISSUES == INTERIM.
2 18 1. The legislative council is requested to
2 19 establish a legislative study committee for the 2009
2 20 interim to identify strategies and solutions to
2 21 address problems arising from inappropriate medication
2 22 use in the health care system.
2 23 2. The study committee shall consist of members of
2 24 the general assembly, and representatives of the

2 25 department of public health, the Iowa pharmacy
2 26 association, the Iowa medical society, wellmark blue
2 27 cross blue shield, the principal financial group, the
2 28 university of Iowa college of public health, the
2 29 health policy corporation of Iowa, and the Iowa
2 30 foundation for medical care.

2 31 3. The study committee shall document the extent
2 32 and causes of medication use problems and examine
2 33 potential solutions including medication therapy
2 34 management programs, evidence-based prescriber
2 35 education programs, clinical pharmacy services in the
2 36 primary medical home, collaborative practice models of
2 37 care, and quality and performance-based payment
2 38 systems.

2 39 4. The study committee shall submit a report of
2 40 its findings and recommendations to the general
2 41 assembly for consideration during the 2010 legislative
2 42 session.>

2 43 #19. Page 71, by inserting after line 9 the
2 44 following:

2 45 <Sec. _____. Section 426B.5, subsection 2, paragraph
2 46 i, subparagraph (3), Code 2009, is amended to read as
2 47 follows:

2 48 (3) Avoiding the need for reduction or elimination
2 49 of a mobile crisis team or other critical emergency
2 50 services when the reduction or elimination places the
3 1 public's health or safety at risk.>

3 2 #20. Page 76, by striking lines 10 through 13, and
3 3 inserting the following: <efforts of the bodies.>

3 4 #21. Page 78, line 10, by striking the figure
3 5 <891,219> and inserting the following: <999,219>.

3 6 #22. Page 78, line 13, by striking the figure
3 7 <346,224> and inserting the following: <454,224>.

3 8 #23. Page 78, line 24, by striking the figure
3 9 <2,253,507> and inserting the following: <2,720,507>.

3 10 #24. Page 80, line 22, by striking the figure
3 11 <61,350> and inserting the following: <225,350>.

3 12 #25. Page 80, line 27, by inserting after the
3 13 figure <2006.> the following: <The department of
3 14 public health shall report to the persons designated
3 15 in division I of this Act for submission of reports
3 16 regarding use of the funds allocated in this lettered
3 17 paragraph, on or before January 10, 2010.>

3 18 #26. Page 80, by striking line 28, and inserting
3 19 the following:

3 20 <g. (1) Of the funds appropriated in this
3 21 subsection, \$347,520>.

3 22 #27. Page 80, by inserting after line 33 the
3 23 following:

3 24 <(2) Of the funds appropriated in this subsection,
3 25 \$70,000 shall be used to provide conference
3 26 scholarships to direct care workers.

3 27 (3) The association specified in this lettered
3 28 paragraph shall report to the persons designated in
3 29 division I of this Act for submission of reports on or
3 30 before January 1, 2010, the use of the funds allocated
3 31 in this lettered paragraph, any progress made
3 32 regarding the initiatives specified and in expanding
3 33 the association statewide, and the number of
3 34 scholarships provided, and shall include in the report
3 35 a copy of the association's internal revenue service
3 36 form 990.>

3 37 #28. Page 81, line 15, by striking the figure
3 38 <111,409,156> and inserting the following:
3 39 <111,834,156>.

3 40 #29. Page 81, line 29, by striking the word
3 41 <sixteen> and inserting the following: <seventeen>.

3 42 #30. Page 84, by striking lines 5 through 12.

3 43 #31. Page 85, by inserting after line 16 the
3 44 following:

3 45 <TRAINING FOR CHILD WELFARE SERVICES PROVIDERS
3 46 Sec. _____. 2008 Iowa Acts, chapter 1187, section 9,
3 47 subsection 20, paragraph c, subparagraph (6), is
3 48 amended to read as follows:

3 49 (6) For training for child welfare services
3 50 providers, \$250,000. The training shall be developed
4 1 by the department in collaboration with the coalition
4 2 for children and family services in Iowa.

4 3 Notwithstanding section 8.33, moneys allocated in this
4 4 subparagraph that remain unencumbered or unobligated
4 5 at the close of the fiscal year shall not revert but

4 6 shall remain available for expenditure for the
4 7 purposes designated until the close of the succeeding
4 8 fiscal year.>

4 9 #32. Page 86, by inserting after line 6 the
4 10 following:

4 11 <FAMILY SUPPORT SUBSIDY SLOTS
4 12 Sec. _____. 2008 Iowa Acts, chapter 1187, section
4 13 19, is amended by adding the following new subsection:
4 14 NEW SUBSECTION. 3. If at any time during the
4 15 fiscal year, the amount of funding available for the
4 16 family support subsidy program is reduced from the
4 17 amount initially used to establish the figure for the
4 18 number of family members for whom a subsidy is to be
4 19 provided at any one time during the fiscal year,
4 20 notwithstanding section 225C.38, subsection 2, the
4 21 department shall revise the figure as necessary to
4 22 conform to the amount of funding available.

4 23 PREGNANCY COUNSELING
4 24 Sec. _____. 2008 Iowa Acts, chapter 1187, section
4 25 30, is amended by adding the following new unnumbered
4 26 paragraph:
4 27 NEW UNNUMBERED PARAGRAPH. Notwithstanding section
4 28 8.33, moneys appropriated in this section that remain
4 29 unencumbered or unobligated at the close of the fiscal
4 30 year shall remain available for expenditure for the
4 31 purpose designated until the close of the fiscal year
4 32 beginning July 1, 2010.>

4 33 #33. Page 97, by striking line 10 and inserting
4 34 the following: <~~chairperson, upon the request of a~~
4 35 ~~state agency, state medical examiner or as~~>.

4 36 #34. Page 111, by inserting after line 17 the
4 37 following:

4 38 <DIVISION ____
4 39 IOWACARE == NONPARTICIPATING
4 40 PROVIDER == REIMBURSEMENT
4 41 Sec. _____. NEW SECTION. 249J.24A
4 42 NONPARTICIPATING PROVIDER REIMBURSEMENT FOR COVERED
4 43 SERVICES == REIMBURSEMENT FUND.
4 44 1. A nonparticipating provider may be reimbursed
4 45 for covered expansion population services provided to
4 46 an expansion population member by a nonparticipating
4 47 provider, if the nonparticipating provider contacts
4 48 the appropriate participating provider prior to
4 49 providing covered services to verify consensus
4 50 regarding one of the following courses of action:
5 1 a. If the nonparticipating provider and the
5 2 participating provider agree that the medical status
5 3 of the expansion population member indicates it is
5 4 medically possible to postpone provision of services,
5 5 the nonparticipating provider shall direct the
5 6 expansion population member to the appropriate
5 7 participating provider for services.
5 8 b. If the nonparticipating provider and the
5 9 participating provider agree that the medical status
5 10 of the expansion population member indicates it is not
5 11 medically possible to postpone provision of services,
5 12 the nonparticipating provider shall provide medically
5 13 necessary services.
5 14 c. If the nonparticipating provider and the
5 15 participating provider agree that transfer of the
5 16 expansion population member is not possible due to
5 17 lack of available inpatient capacity, the
5 18 nonparticipating provider shall provide medically
5 19 necessary services.
5 20 d. If the medical status of the expansion
5 21 population member indicates a medical emergency and
5 22 the nonparticipating provider is not able to contact
5 23 the appropriate participating provider prior to
5 24 providing medically necessary services, the
5 25 nonparticipating provider shall document the medical
5 26 emergency and inform the appropriate participating
5 27 provider immediately after the member has been
5 28 stabilized of any covered services provided.
5 29 2. a. If the nonparticipating provider meets the
5 30 requirements specified in subsection 1, the
5 31 nonparticipating provider shall be reimbursed for
5 32 covered expansion population services provided to the
5 33 expansion population member through the
5 34 nonparticipating provider reimbursement fund in
5 35 accordance with rules adopted by the department of
5 36 human services. However, any funds received from

5 37 participating providers, appropriated to participating
5 38 providers, or deposited in the IowaCare account
5 39 pursuant to section 249J.24, shall not be transferred
5 40 or appropriated to the nonparticipating provider
5 41 reimbursement fund or otherwise used to reimburse
5 42 nonparticipating providers.

5 43 b. Reimbursement of nonparticipating providers
5 44 under this section shall be based on the reimbursement
5 45 rates and policies applicable to the nonparticipating
5 46 provider under the full benefit medical assistance
5 47 program, subject to the availability of funds in the
5 48 nonparticipating provider reimbursement fund and
5 49 subject to the appropriation of moneys in the fund to
5 50 the department.

6 1 c. The department shall reimburse the
6 2 nonparticipating provider only if the recipient of the
6 3 services is an expansion population member with active
6 4 eligibility status at the time the services are
6 5 provided.

6 6 3. a. A nonparticipating provider reimbursement
6 7 fund is created in the state treasury under the
6 8 authority of the department. Moneys designated for
6 9 deposit in the fund that are received from sources
6 10 including but not limited to appropriations from the
6 11 general fund of the state, grants, and contributions,
6 12 shall be deposited in the fund. However, any funds
6 13 received from participating providers, appropriated to
6 14 participating providers, or deposited in the IowaCare
6 15 account pursuant to section 249J.24 shall not be
6 16 transferred or appropriated to the nonparticipating
6 17 provider reimbursement fund or otherwise used to
6 18 reimburse nonparticipating providers.

6 19 b. Moneys in the fund shall be separate from the
6 20 general fund of the state and shall not be considered
6 21 part of the general fund of the state. The moneys
6 22 deposited in the fund are not subject to section 8.33
6 23 and shall not be transferred, used, obligated,
6 24 appropriated, or otherwise encumbered, except to
6 25 provide for the purposes specified in this section.
6 26 Notwithstanding section 12C.7, subsection 2, interest
6 27 or earnings on moneys deposited in the fund shall be
6 28 credited to the fund.

6 29 c. Moneys deposited in the fund shall be used only
6 30 to reimburse nonparticipating providers who provide
6 31 covered services to expansion population members if no
6 32 other third party is liable for reimbursement and as
6 33 specified in subsection 1.

6 34 d. The department shall attempt to maximize
6 35 receipt of federal matching funds under the medical
6 36 assistance program for covered services provided under
6 37 this section if such attempt does not directly or
6 38 indirectly limit the federal funds available to
6 39 participating providers.

6 40 4. For the purposes of this section,
6 41 "nonparticipating provider" means a hospital licensed
6 42 pursuant to chapter 135B that is not a member of the
6 43 expansion population provider network as specified in
6 44 section 249J.7.

6 45 Sec. _____. NONPARTICIPATING PROVIDER REIMBURSEMENT
6 46 FOR COVERED SERVICES == IOWACARE PROGRAM WAIVER
6 47 RENEWAL.

6 48 1. Beginning July 1, 2010, the department of human
6 49 services shall include in any medical assistance
6 50 program waiver relating to the continuation of the
7 1 IowaCare program pursuant to chapter 249J, provisions
7 2 for reimbursement of covered expansion population
7 3 services provided to an expansion population member by
7 4 a nonparticipating provider subject to all of the
7 5 following:

7 6 a. A nonparticipating provider may be reimbursed
7 7 if the nonparticipating provider contacts the
7 8 appropriate participating provider prior to providing
7 9 covered services to verify consensus regarding one of
7 10 the following courses of action:

7 11 (1) If the nonparticipating provider and the
7 12 participating provider agree that the medical status
7 13 of the expansion population member indicates it is
7 14 medically possible to postpone provision of services,
7 15 the nonparticipating provider shall direct the
7 16 expansion population member to the appropriate
7 17 participating provider for services.

7 18 (2) If the nonparticipating provider and the
7 19 participating provider agree that the medical status
7 20 of the expansion population member indicates it is not
7 21 medically possible to postpone provision of services,
7 22 the nonparticipating provider shall provide medically
7 23 necessary services.

7 24 (3) If the nonparticipating provider and the
7 25 participating provider agree that transfer of the
7 26 expansion population member is not possible due to
7 27 lack of available inpatient capacity, the
7 28 nonparticipating provider shall provide medically
7 29 necessary services.

7 30 (4) If the medical status of the expansion
7 31 population member indicates a medical emergency and
7 32 the nonparticipating provider is not able to contact
7 33 the appropriate participating provider prior to
7 34 providing medically necessary services, the
7 35 nonparticipating provider shall document the medical
7 36 emergency and inform the appropriate participating
7 37 provider immediately after the member has been
7 38 stabilized of any covered services provided.

7 39 b. Reimbursement of a nonparticipating provider
7 40 shall be based on the reimbursement rates and policies
7 41 applicable to the nonparticipating provider under the
7 42 full benefit medical assistance program, subject to
7 43 the availability and appropriation of funds to the
7 44 department for such purpose.

7 45 c. Reimbursement shall be made to a
7 46 nonparticipating provider only if the recipient of the
7 47 services is an expansion population member with active
7 48 eligibility status at the time the services are
7 49 provided.

7 50 d. For the purposes of this section,
8 1 "nonparticipating provider" means a hospital licensed
8 2 pursuant to chapter 135B that is not a member of the
8 3 expansion population provider network as specified in
8 4 section 249J.7.

8 5 2. Notwithstanding the requirement of this section
8 6 directing the department of human services to include
8 7 provisions for reimbursement of covered services
8 8 provided to an expansion population member by a
8 9 nonparticipating provider under any medical assistance
8 10 program waiver relating to the continuation of the
8 11 IowaCare program beginning July 1, 2010, if the
8 12 department of human services in consultation with the
8 13 governor determines that such requirement would
8 14 adversely affect continuation of or would reduce the
8 15 amount of funding available for the IowaCare waiver,
8 16 the department shall not include such provisions in
8 17 the IowaCare waiver.>

8 18 #35. Page 111, by inserting after line 19 the
8 19 following:

8 20 <Sec _____. NEW SECTION. 157.3B EXAMINATION
8 21 INFORMATION.

8 22 Notwithstanding section 147.21, individual pass or
8 23 fail examination results made available from the
8 24 authorized national testing agency to the board may be
8 25 disclosed to the board=approved education program from
8 26 which the applicant for licensure graduated for
8 27 purposes of verifying accuracy of national data and
8 28 reporting aggregate licensure examination results as
8 29 required for a program's continued accreditation.>

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8 33 JACK HATCH
8 34 HF 811.312 83
8 35 pf/jp/22969